

Retirement and Insurance Information for Employees Entering Active Military Duty

On October 13, 1994, the Uniformed Services Employment and Reemployment Rights Act (USERRA) was passed. USERRA expanded the rights of employees entering uniformed services, therefore, giving employees options related to their employment and benefits. The following is a checklist designed to counsel the employee on their benefits and provide an opportunity for them to make elections regarding their options.

Health Benefits. Employees who are covered by the Federal Employees Health Benefits Program (FEHBP) and are either separated or placed in a LWOP status to perform military service may continue to be covered by FEHB for up to 18 months, unless the employee elects in writing to have the enrollment terminated. If the employee chooses to continue the FEHB, he/she is responsible for paying the employee share of the premium for the first 12 months and 102% for the final 6 months of continued coverage. Employees may pay currently or incur a debt to be paid upon their return.

Note: You may cancel your FEHB at any time by notifying your personnel office. When you cancel an enrollment, it is considered a break in coverage. Termination is not considered a break.

Life Insurance. Employees who separate or are placed on LWOP to perform active duty service continue to be covered by the Federal Employees' Group Life Insurance (FGLI) for up to 12 months at no cost to the employee.

Retirement. An employee who is placed on LWOP while performing active military duty continues to be covered by the retirement law, i.e., CSRS or FERS. Death and disability benefits under the civilian retirement rules would apply if the employee continues in LWOP. If an employee separates to perform active military duty, he/she would generally receive retirement credit for the period of separation if a deposit for the military service is made. Upon restoration to the civilian position, the employee may make a deposit for the military service. The deposit would equal the lesser of 1) *7% (or *3% for FERS) of the military basic pay OR 2) *7% (or *.8% for FERS) of the civilian pay. If the military deposit is paid before the interest accrual date (within 3 years of returning to a covered position) no interest is charged on the military deposit.

**Note: In January 1999, the CSRS retirement contribution rate is 7.25% and FERS 1.05%. The increase in contributions will affect military service performed between January 1999 through December 2002. Contact your personnel office upon your return for more information.*

Thrift Savings Plan. No contributions can be made to the TSP while on LWOP or separation from the civilian position. However, if the employee is restored to his/her

civilian position, retroactive contributions and TSP elections may be made to cover that period of service. Employees interested in making retroactive contributions must contact their servicing payroll office to setup a payment plan.

For Personnel:

Documenting Personnel Actions. LWOP for 30 calendar days or more, must be documented on an SF-50, Notification of Personnel Action. The nature of action code is 473/LWOP-US and the authority code is Q3K/5 CFR 353. Upon return to duty, use the same authority code with a nature of action code 292/RTD. Employees who have FEHB coverage, enter in block 45 of the SF 50 remark B66, "Health benefits coverage will continue for 18 months unless you elect to cancel coverage. You are liable for the employee share of the premiums for the first 365 days and for 102% of the full subscription charge after 365 days. Payment for coverage after 365 days must be made on a current basis; payment for the first 365 days may be made while you are absent or when you return." The employees with FEGLI coverage, enter remark B39, "FEGLI coverage continues for up to 12 months in a nonpay status."

If the employee requests to be separated rather than LWOP, document the records with nature of action code 353/Separation-US and authority Q3K/5 CFR 353. The same remarks on FEHB and FEGLI apply.

Acknowledgement of receipt:

_____ (Name of Employee and Date Signed)

RETIREMENT AND INSURANCE CHECKLIST FOR EMPLOYEES ENTERING ACTIVE MILITARY DUTY

I want to be: (Please initial your election/acknowledgement)

_____ Placed on LWOP, beginning _____.

_____ Separated, effective _____.

Health Benefits:

_____ I want to terminate my FEHB effective _____.

_____ I want to continue by FEHB. I understand that I can cancel at any time but it will be considered a break in coverage for retirement purposes.

_____ I want to pay for my FEHB on a continuing basis during my absence.

_____ I want to incur a debt to be paid upon my return.

(I understand that if I continue my FEHB after the first 12 months, I will pay 102% of the cost and it must be paid currently.)

FEGLI:

_____ I understand that my FEGLI coverage will continue for 12 months with no cost to me.

Retirement:

_____ I understand that if I am placed on LWOP, death and disability benefits continue under my retirement system.

_____ I understand that the military service is potentially creditable service but I must make a deposit for that service to avoid Catch-62 (CSRS must make a deposit if first hired on or after 10-1-82 – same applies for FERS).

If you are restored (return within 5 years from military service) you will have the deposit calculated in two ways. For CSRS employees entering active military duty in 1999, the deposit is calculated using 7.25% (7% if before 1/1/99) of military base pay, and 7.25% (7% if before 1/1/99) of civilian pay you would have earned, paying the lesser amount. For FERS employees entering active military duty in 1999, the deposit would be 3.25% of your military base pay or 1.05% (.8% if before 1/1/99) of the civilian pay you would have earned.. If you are not restored, the military deposit calculation would be made against your military base pay.

Thrift Savings Plan:

If you are restored to your civilian position, you may make retroactive contributions and elections.

_____ I understand that I will need to contact my personnel office to make retroactive TSP contributions and elections.

I understand my elections. _____ **Date:** _____

Home Address: _____